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CONFIRMATION NO. 7935

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|---|---|------------------------------------|--|--|
| SERIAL NUMBER 10/689,487 | FILING OR 371(c) DATE 10/20/2003 RULE | CLASS 606 | GROUP ART UNIT 3775 | ATTORNEY DOCKET NO. 1291.1134103 |
| APPLICANTS Thomas W. Davison, North Attleboro, MA; | | | | |
| ** CONTINUING DATA ***** This application is a CON of 10/280,489 10/25/2002 PAT 7,056,321 which is a CIP of 09/630,077 08/01/2000 PAT 6,530,926 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/17/2004 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged | | STATE OR COUNTRY MA | SHEETS DRAWING 15 | TOTAL CLAIMS 17 |
| Examiner's Signature _____ Initials _____ | | INDEPENDENT CLAIMS 1 | | |
| ADDRESS 33469 | | | | |
| TITLE Method of securing vertebrae | | | | |
| FILING FEE RECEIVED 796 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |